



**STATE OF NEW HAMPSHIRE**  
**DEPARTMENT OF SAFETY**  
**DIVISION OF FIRE STANDARDS & TRAINING**  
**BUREAU OF EMERGENCY MEDICAL SERVICES**

**Richard M. Flynn**  
Commissioner

**33 HAZEN DRIVE, CONCORD, NH 03305**  
**603-271-4568 TDD Access 1-800-735-2964**  
**Toll Free NH 1-888-827-5367**  
**Fax: 603-271-4567**

**Richard A. Mason**  
Director

**Suzanne M. Prentiss**  
Bureau Chief

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**TRAUMA MEDICAL REVIEW COMMITTEE**  
**COMMITTEE MEETING**

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**February 16, 2005**  
**Richard M. Flynn Fire Academy**  
**Concord, New Hampshire**

**Members Present:** John Sutton, MD, Michael Pepin, EMTP, Clare Wilmot, MD, Kathy Bizarro, John DeSilva

**Guests:** Donna York Clark, RN, Janet Houston, Sharon Phillips, RN, Melissa Twomey, RN

**Bureau Staff:** Clay Odell, EMTP, RN

**I. Call to Order**

**Item 1.** The meeting of the Trauma Medical Review Committee was called to order by Dr. Sutton at 9:35 am on Wednesday February 16, 2005 at the Richard M. Flynn Fire Academy in Concord, NH.

**II. Acceptance of Minutes**

**Item 1. Minutes.** The minutes of the December 2004 meeting were approved by email by all who attended that meeting, and were distributed by e-mail prior to this meeting. There was no discussion regarding the minutes.

Clay requested that members make every effort to approve draft minutes once they receive them by email. Draft minutes are required to be posted within six days of the meetings.

**II. Committee Discussion Items**

**Item 1. NH Bureau of EMS Update:** Sue Prentiss was attending another meeting. Clay distributed her report and highlighted several issues. Vicki Blanchard is the new ALS Coordinator and Eric Perry has been appointed to the Field Services position. In the TEMSIS project a vendor has been selected and contract issues are moving forward with that vendor. We still anticipate the project to go live statewide by the end of 2005.

Mass Casualty Incident (MCI) planning is being facilitated by the Bureau with Steve Achilles, EMTP, Assistant Chief of Portsmouth Fire Department doing presentations on that topic. This project is to help local agencies conduct MCI planning. The Trauma

Triage education project and the Trauma Documentation project are going on. Eight Trauma Documentation Train the Trainer classes have been held throughout the state and three more are scheduled. All these continue to be coordinated by Jackie Stocking.

The Hospital Trauma Coordinator's Working Group had its third meeting last month. This effort continues to be supported by the NHBEMS. A position on the TMRC is open for a trauma nurse coordinator and the working group is working toward nominating a member of this group to Commissioner Richard Flynn for appointment to that position.

Dr. Sutton asked what the group discusses. Melissa Twomey said the group talks about issues such as interfacility transport, subspecialty coverage issues, common obstacles that are faced by the hospitals, trauma coordinators role. Sharon Philips said that QA issues, protocols, helicopter landing pad issues are discussed and it is a really good forum to share information. Dr. Sutton asked if there is anything the TMRC can do to help this group. Melissa felt that the appointment of a member of the group to the TMRC will be helpful. Dr. Sutton supported the efforts of this group and felt it was a good opportunity for two-way exchange of information between the TMRC and the hospitals. Clare Wilmot concurred with that support.

**Item 2.           Renewal and Hospital Updates**     Dr. Sutton opened a discussion regarding Neurosurgical resources in Level II facilities. As discussed at previous TMRC meetings, Level II facilities are finding it impossible to provide 24/7 neurosurgical call coverage. The options the TMRC must consider are whether to adhere to the current trauma plan, and decertify Level II centers that cannot comply, or to modify the plan to accommodate these hospitals. The group felt that the participation of the current Level II facilities in the trauma system is too important to lose them as Level II trauma hospitals, so an alternative plan should be added to the trauma plan.

After considerable discussion the following plan was drafted. A hospital applying for Level II status may either comply with the requirement of 24-hour availability of neurosurgical coverage or may adopt the alternative plan for neurosurgical coverage. In order to use the alternate plan for neurosurgical coverage the facility must agree to the following:

- ❖ The facility provides 24 hour neurosurgical coverage for greater than 50% of the time on average.
- ❖ The facility has a written plan on how traumatic brain injured patients are assessed, treated and/or transferred, with written transfer agreements in place.
- ❖ The trauma service must arrange for a TMRC educational team to conduct an educational program with the trauma surgery staff discussing the care of potential neurotrauma patients by general (trauma) surgeons.
- ❖ The trauma service must agree to conduct an ongoing QI review of all TBI transfers, study to be monitored by the State EMS Trauma Coordinator on behalf of the TMRC.

A motion was made by Clare Wilmot and seconded by Kathy Bizarro to approve the above plan for addition to the NH Trauma Plan. The motion carried unanimously.

In additional action the renewal application from Southern NH Medical Center was presented for consideration by the TMRC. Clay and Dr. Sutton previously met to review the document and had several questions, which they sent back to SNHMC for clarification. SNHMC replied to those concerns and the clarified document was distributed to participants for review and comment.

SNHMC's application carried the kind of neurosurgical coverage deficiencies that were discussed in the previous discussion. Clay and Dr. Sutton recommended acceptance of the application. Following discussion a motion was made and seconded to grant SNHMC renewal as a Level II Trauma Hospital conditional on their acceptance of the Neurosurgical alternative conditions adopted above. The motion carried unanimously. Clay will set up a meeting with the trauma section leadership at SNHMC to discuss this action.

Clay has received St. Joseph Hospital's renewal application. He has some questions for St. Joe's and then will meet with Dr. Sutton to review the application. Androscoggin Valley Hospital is meeting about their application this week. Elliot Hospital has requested an extension. Cheshire Medical Center has not replied yet. Cottage Hospital is still awaiting their site review and Valley Regional Hospital has requested information about applying for assignment. Clay sent them the criteria and will meet with them soon. Sharon Phillips asked if Clay could send an application packet to Concord Hospital soon. Clay said he would send her one next week.

**Item 3. Legislative Action** Clay Odell passed out copies of two injury prevention initiatives that are before the NH legislature. One (HB118) is a bill to require bike helmet use for all bicycle operators age 16 or younger operating on public ways. The other (HB705) is a bill requiring seatbelt use for all motor vehicle operators and passengers. The TMRC discussed the merits of each of these bills. The TMRC voted unanimously to support the mandatory seat belt bill due to the proven results of a mandatory seatbelt law in reducing fatalities. Dr. Sutton is testifying at the Committee hearing on the legislation this week and will create a letter indicating the TMRC's support of the bill.

In discussion of the bike helmet bill it was noted that there wasn't substantial evidence linking the use of bike helmets to actually reducing fatalities. The consensus of the TMRC was to monitor the progress of this bill and consider further action at a later time.

Clay reports that he attended the national trauma leadership meeting in Arlington Virginia earlier this month. One subject of note from that meeting was the Health Resources and Services Administration (HRSA) Trauma and EMS grant. The grant guidance is not available yet. The Trauma/EMS program has 2 million dollars, which is being made available to the states and territories. States will be allowed to apply for up to \$40,000 per year for a three-year grant period. Conditions on the grant are a three to one match of non-federal funds to federal funds. So in order to get \$40,000 NH has to

show non-federal funding of \$120,000 for projects the grant is funding. When the grant guidance comes out we will review the nature of “in kind” services that are allowed to be considered toward the 3-1 match. The grant application will need to be submitted by April 11, 2005.

Additionally, Clay reports that he has received information (which appears to be confirmed in the budget that the White House Office of Management and Budget submitted to Congress) that the funding for this program as well as EMS for Children has been zero-funded.

Clay and Sue Prentiss will consider the grant more closely once the grant guidance is released.

### **III. Old Business**

**Item 1. Committee Re-appointments** The letter from the NH Association of Fire Chiefs nominating John DeSilva to the NH TMRC has been sent to Commissioner Flynn’s office and we are anticipating Chief DeSilva’s appointment letter.

Dr. Thomas Andrew of the NH Office of Medical Examiner has indicated that they have selected a representative to the TMRC from their office. Clay will coordinate with them.

**Item 2. Air Medical Transport Projects** The 2005 EMS protocols which include the new air medical transport (AMT) protocol are being rolled out. Until the legislation is passed regarding the changing nature of EMS protocols the AMT protocol is still considered a “local option” protocol. Clay says that he will make himself available to help explain/advocate for the AMT protocol as needed.

Clay distributed copies of the NH Fire and EMS News, which includes an article justifying the protocol.

Donna Clark shared some statistics from DHART regarding scene requests in NH. DHART did 6 scene flights in the past month, which is a higher monthly figure than previous years. She believes the word is getting out there and practices are incrementally beginning to change.

Clay also indicated that a utilization review committee to examine AMT scene flights in NH will be established as part of the process. He has been gathering information and advice on how to establish that process. He is soliciting members for that group. He anticipates conducting the first meeting after the June 2005 TMRC meeting.

There was some discussion about discoverability in the utilization review process. Clay will check into this more thoroughly but the information the state gets is de-identified, so it should not be an issue.

### **IV. New Business**

**Item 1. Interfacility Transport Summit** At the 2004 NH Trauma Conference one of the breakout group issues of substantial concern was a perceived increase in difficulty arranging for interfacility ambulance transport, particularly of serious trauma and critically ill patients.

The NH Bureau of EMS is facilitating a multidisciplinary stakeholder's conference to discuss the issue and brainstorm on potential solutions using group dynamic tools. Invitees to the program include hospital administrators, ED physicians, ED nurse managers, EMS system leaders and State Legislators. A facilitator has been selected, Kevin McGinnis from Maine. Kevin is currently a consultant to the National Association of State EMS Directors and is the principle author of the Rural/Frontier EMS Agenda for the Future. He is the former Director of the Maine Department of EMS.

The NH Interfacility Transport Summit is scheduled for March 11, 2005 and will be held at the Cabot Motor Inn in Lancaster, NH. The brochure went out this week.

**Item 2. Intersections Collaborative** Dr. Joseph Sabato was scheduled to discuss initiative that the Intersections Collaborative were engaged in. Unfortunately Dr. Sabato was unable to attend the meeting today, so will be rescheduled at a later date.

## **V. Public Comment**

Sharon Phillips announced that Concord Hospital will be hosting their annual trauma conference on April 12, 2005 at Concord Hospital.

Clay also announced his plans to conduct an orientation to the TMRC for new members after the April TMRC meeting, during lunch.

## **VI. Adjournment**

Dr. Sutton adjourned the meeting at 11:30. He advised the group that the next meeting of the Trauma Medical Review Committee will be held at the Richard M. Flynn Fire Academy on Wednesday April 20, 2005.